## **APPLICATION DATA SHEET**

#### **Application Information**

**Application Number::** CONTINUATION OF 10/270,313

Filing Date:: December 16, 2003

**Application Type::** Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

**Number of CD Disks::** 

Number of Copies of CDs::

Sequence Submission?::
Computer Readable Form

(CFR)?::

Number of Copies of CFR::

Title:: METHOD FOR TREATMENT OF TUMORS USING

NORDIHYDROGUAIARETIC ACID DERIVATIVES

Attorney Docket Number:: 2240-199065

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets:: 23

Small Entity?:: Yes

Latin Name::

**Variety Denomination Name::** 

Petition Included?::

**Petition Type::** 

**Licensed US Govt. Agency::** 

**Contract or Grant Numbers::** 

Secrecy Order in Parent Appl.::

#### **Applicant Information**

Applicant Authority Type::

Inventor

**Primary Citizenship::** 

USA

Country::

USA

Status::

**Full Capacity** 

Given Name::

Ru Chih

Middle Name::

C.

Family Name::

HUANG

Name Suffix::

City of Residence::

**Baltimore** 

State or Province of Residence::

MD

**Country of Residence::** 

USA

**Street of Mailing Address::** 

3400 N. Charles Street

**City of Mailing Address::** 

Baltimore

State or Province of Mailing

Address::

MD

**Country of Mailing Address::** 

USA

Postal or Zip Code of Mailing

Address::

21218

Applicant Authority Type::

Inventor

**Primary Citizenship::** 

USA

Country::

USA

Status::

**Full Capacity** 

Given Name::

Jonathan

Middle Name::

D.

Family Name::

HELLER

Name Suffix::

City of Residence::

Dundalk

State or Province of Residence::

MD

**Country of Residence::** 

USA

**Street of Mailing Address::** 

8208 Beach Drive

City of Mailing Address::	Dundalk
State or Province of Mailing Address::	MD
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	21222
Applicant Authority Type::	Inventor
Primary Citizenship::	Taiwanese
Country::	Taiwan
Status::	Full Capacity
Given Name::	Chih-Chuan
Middle Name::	
Family Name::	CHANG
Name Suffix::	
City of Residence::	Baltimore
State or Province of Residence::	MD
Country of Residence::	USA
Street of Mailing Address::	3501 St. Paul Street, Apt. 827
City of Mailing Address::	Baltimore
State or Province of Mailing Address::	MD
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	21218
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	

Name Suffix::

City of Residence::

State or Province of Residence::

**Country of Residence::** 

**Street of Mailing Address::** 

City of Mailing Address::

State or Province of Mailing

Address::

**Country of Mailing Address::** 

Postal or Zip Code of Mailing

Address::

#### **Correspondence Information**

**Correspondence Customer** 

26694

Number::

202-344-4000

Fax Number::

202-344-8900

E-Mail Address::

Phone Number::

ashobbs@venable.com

### **Representative Information**

Representative Customer

26694

Number::

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
•	Continuation of	10/270,313	10/15/2002
	Continuation of	09/851,425	05/09/2001
	Continuation-in-part	09/690,063	10/16/2000
	Continuation-in-part	09/418,594	10/15/1999

# **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

## **Assignee Information**

**Assignee Name::** 

JOHNS HOPKINS UNIVERSITY

**Street of Mailing Address::** 

3400 North Charles Street

**City of Mailing Address::** 

**Baltimore** 

State or Province of Mailing

MD

Address::

**Country of Mailing Address::** 

USA

Postal or Zip Code of Mailing

21218

Address::